



September 29, 2015

Announcement 988

## **Special Batch Requests for Inpatient Newborn Claims that Denied because Eligibility Changed from Managed Care Organization to Fee-for-Service after Date of Birth**

Inpatient hospital providers can request special batch re-processing of newborn claims with dates of service from May 1, 2013, through May 31, 2015, originally submitted within timely filing limits, but inappropriately denied for no prior authorization due to a change in eligibility from Managed Care Organization (MCO) to Fee-for-Service (FFS) after a newborn's date of birth. These claims must be received by HP Enterprise Services by October 30, 2015, to be eligible for reimbursement.

Providers can also request special batch re-processing of newborn claims with dates of service after May 31, 2015, inappropriately denied for no prior authorization due to a change in eligibility from MCO to FFS after a newborn's date of birth as long as the original claim submission *and* special batch reprocessing request are submitted within timely filing limits.

For all claims mentioned above, providers must submit to the attention of the HP Enterprise Services Customer Service Unit a paper claim with a cover letter referencing this Web Announcement 988 and request special batch processing. In order to be reimbursed, the affected claims must meet all of the following criteria:

- A newborn's eligibility changed from MCO to FFS after the date of birth during the initial inpatient episode of care;
- Inpatient newborn days were billed with revenue codes 0170, 0171 or 0172;
- Diagnosis codes on the claim are for a vaginal or Cesarean section delivery;
- Newborn inpatient days do not exceed three days related to a vaginal delivery or four days related to a Cesarean section delivery; and
- The claim denied for no prior authorization.